2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2009
Secretary of State

DOCUMENT# N93000002724

Entity Name: THE FRANCES LOUISE WOLFSON FAMILY FOUNDATION, INC.

Current Principal Place of Business:

RR #2 BOX 113
MARATHON, FL 33050 US

New Principal Place of Business:

56283 OCEAN DR
MARATHON, FL 33050 US

Current Mailing Address:

56283 OCEAN DR
MARATHON, FL 33050 US

New Mailing Address:

FEI Number: 65-6118860 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILCOX, CHERYL
56283 OCEAN DR
MARATHON, FL 33050 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: WOLFSON, FRANCES L
Address: RR #2 BOX 113
City-St-Zip: MARATHON, FL

Title: DVP ( ) Delete
Name: WAXENBERG, JERI L
Address: RR #2 BOX 113
City-St-Zip: MARATHON, FL

Title: DST ( ) Delete
Name: WILCOX, CHERYL A
Address: RR #2 BOX 113
City-St-Zip: MARATHON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: WOLFSON, FRANCES L
Address: 56283 OCEAN DR
City-St-Zip: MARATHON, FL 33050 US

Title: DVP (X) Change ( ) Addition
Name: WAXENBERG, JERI L
Address: 56283 OCEAN DR
City-St-Zip: MARATHON, FL 33050 US

Title: DST (X) Change ( ) Addition
Name: WILCOX, CHERYL A
Address: 56283 OCEAN DR
City-St-Zip: MARATHON, FL 33050 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHERYL WILCOX S 02/03/2009

Electronic Signature of Signing Officer or Director — Date